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## FACSIMILE

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TO		Rita White		6/2/05	
NAME		USPTO - PCT Branch		DATE	
COMPANY/FIRM				703-305-3230	
NUMBER OF PAGES INCLUDING COVER:		2		FAX #	
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FROM		Debra Noel		Refund Denials	
NAME		703-412-6296		OUR REFERENCE	
DIRECT PHONE #				YOUR REFERENCE	

## MESSAGE

3/7  
In response to the attached refund denials, I have several questions. I could only locate a few files and will need time to look at the rest.

The below-listed cases have paid for the correct number of claims using the new fee structure. Therefore, I cannot see how the refunds can be denied because the claim fees were increased. This is not an issue in these cases.

✓ S.N. 10/523,393 (Docket No. 265017US). The correct claim count is 24. 4 additional claims were paid for at \$50.00 per claim for a total of \$200.00. Exam fees.

✓ S.N. 10/523,394 (Docket No. 265436). The correct claim count is 40. 20 additional claims were paid for at \$50.00 per claim for a total of \$1,000.00.

✓ S.N. 10/523,586 (Docket No. 265146US). The correct claim count is 27. 7 additional claims were paid for at \$50.00 per claim for a total of \$350.00.

Please call me after you have looked at these cases. I will be in today (Thursday) until 4:00 pm. I will be out of the office June 3-6. Thanks.

Refund Ref: Adjustment date: 06/10/2005 RWHITE1  
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06/10/2005 RWHITE1 00000003 10523393

01 FC:1642

400.00 OP

02711/2005 GFREY1 00000075 10523393  
02 FC:1632

-500.00 OP

Adjustment date: 06/10/2005 RWHITE1  
02/24/2005 GFREY1 00000028 10524669  
02 FC:1632 -500.00 OP

06/10/2005 RWHITE1 00000006 10524669  
01 FC:1642 400.00 OP

Refund Ref:  
06/10/2005 0030022543

Credit Card Refund Total: \$100.00

Am Exp.: XXXXXXXXXXXX1007

Refund Ref:  
06/10/2005 0030022541

Credit Card Refund Total: \$100.00

Am Exp.: XXXXXXXXXXXX1007